REPORT OF RECEIPTS AND DISBURSEMENTS

	For An Autho		orized Committee		Office Use Only	
NAME OF COMMITTEE (in	USE FEC MAIL or Type or F		Example:If typing, type over the lines			
BOB GOODLATT	TE FOR CONGRESS CO	DMMITTEE				
	1 1 1 1 1 1 1 1 1					
ADDRESS (number a	and street) P.O. Box 29	92				
Check if diff						
than previou reported. (A				J VA L	24002	
2. FEC IDENTIFICA	ATION NUMBER 🔻	CITY 🛦		STATE	ZIP CODE ▲ STATE ▼ DISTRICT	
C0025795	66	3. IS THIS REPORT	X NEW (N) OF	AMENDE (A)		
4. TYPE OF REF (a) Quarterly Re	,	(b) 12-Day Pl	RE-Election Report for th	_	D	
	5 Quarterly Report (Q1)	X	Primary (12P) Convention (12C)	General (120		
	Quarterly Report (Q2) or 15 Quarterly Report (Q3)	Election or	0 6 0 8	2010	in the VA State of	
Januar	y 31 Year-End Report (YE)	(c) 30-Day P (OST-Election Report for t	he:		
			General (30G)	Runoff (30R) Special (30S)	
Termin	ation Report (TER)	Election or	1		in the State of	
5. Covering Period	0 4 0 1	2010	through	05 19	2010	
I certify that I have exa	amined this Report and to the	-	dge and belief it is true, co	orrect and complete.		
Type or Print Name of	f Treasurer Kenne	th Prickitt				
Signature of Treasure	Electronically Filed by	Kenneth Prickitt	<u>:</u>	Date 0.5	27 2010	
NOTE : Submission of	of false, erroneous, or incomp	lete information ma	y subject the person sign	ing this Report to the pe	enalties of 2 U.S.C 437g.	
Office Use Only FE5AN018					FEC FORM 3 (Revised 02/2003)	